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DATE: February 19, 2009

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TO: Examiner Anuradha Ramana, Group Art Unit 3775  
COMPANY: U.S. Patent and Trademark Office

FAX NUMBER: 571-273-8300  
PHONE NUMBER:

FROM: Douglas A. Collier

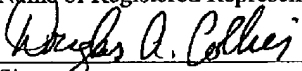
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RE: Response to Final Office Action for U.S. Patent Application No. 10/633,288 to Charles L. Branch et al.

COMMENTS: I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office at 571-273-8300 on:

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PTO/SB/21 (04-07)

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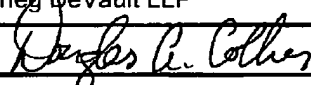
Application Number	10/633,288
Filing Date	August 1, 2003
First Named Inventor	Charles L. Branch et al.
Art Unit	3775
Examiner Name	Anuradha Ramana
Attorney Docket Number	MSDI-261/PC750.00

**ENCLOSURES (Check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax Cover Sheet
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Remarks

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Krieg DeVault LLP		
Signature			
Printed name	Douglas A. Collier		
Date	February 19, 2009	Reg. No.	43,556

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Signature			
Typed or printed name	Douglas A. Collier	Date	February 19, 2009

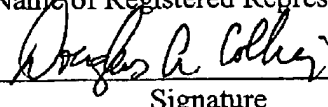
This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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<i>Confirmation No.:</i>	3338	}	I hereby certify that this
<i>Application No.:</i>	10/633,288	}	correspondence is being facsimile
		}	transmitted to the United States
		}	Patent and Trademark Office at 571-
		}	273-8300 on:
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<i>Title of Invention:</i>	SYSTEM AND TECHNIQUES	}	<u>February 19, 2009</u>
	FOR ILLUMINATING A	}	<u>Date of Transmission</u>
	SURGICAL SPACE	}	
		}	
<i>Inventor:</i>	Charles L. Branch et al.	}	<u>Douglas A. Collier</u>
		}	<u>Name of Registered Representative</u>
<i>Filed:</i>	August 1, 2003	}	
		}	<u>Signature</u>
<i>Attorney Docket:</i>	MSDI-261/PC750.00	}	
		}	<u>February 19, 2009</u>
<i>Examiner:</i>	Anuradha Ramana	}	<u>Date of Signature</u>

**RESPONSE TO FINAL OFFICE ACTION**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450  
Mail Stop: Amendment

Sir:

In response to the Final Office Action dated January 9, 2009, please enter and consider the following. No extensions of time or other fees are believed to be due for consideration of this Response. However, please provide any extensions of time necessary and charge any fees which may be necessary to Deposit Account No. 12-2424, but not to include any payment of issue fees.

**Claim Amendments** begin on page 2.

**Remarks** begin on page 11.

Response to Final Office Action  
Application No. 10/633,288  
Docket No. MSDI-261/PC750.00

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